

Clerk of Boards Review:  
Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Building Dept. (Accepted By):  
Date: \_\_\_\_\_ Initials: \_\_\_\_\_

**ENTITY DISCLOSURE FORM**

TOWN OF ORANGETOWN  
Office of Building, Zoning, Planning Administration and Enforcement (OBZPAE)  
20 Greenbush Road  
Orangeburg, New York 10962  
Tel: (845) 359-8410  
Website: [www.orangetown.com](http://www.orangetown.com)

**THIS FORM MUST ACCOMPANY ALL LAND USE APPLICATIONS SUBMITTED BY AN ENTITY AS DEFINED IN CHAPTER 43, ARTICLE 16 OF THE TOWN CODE OF THE TOWN OF ORANGETOWN.**

PROJECT NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

TAX LOT ID: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_

Land Use Application/Brief Description of Project: \_\_\_\_\_  
\_\_\_\_\_

**PART ONE:**

1. Pursuant to Section Chapter 43, Article 16 of the Town Code, the disclosure of the names and address of all persons or entities owning any interest or controlling position of any limited liability company, limited liability partnership, general or limited partnership, professional corporation, joint venture, doing business as name or venture, association, business trust, or non-publically traded corporation, (hereinafter referred to as the "Entity") is required when filing a land-use application.
2. Set forth the names of all members, officers, shareholders, directors, partners or other authorized persons of the Entity for the past year from the date of filing of any land-use board application.
3. Attach a copy of all Entity documents filed with the NYS Secretary of State, or in any other State of formation, including:
  - a. All records regarding membership interests in the Entity;
  - b. Records regarding the transfer of membership interests since the date of formation.
4. If a member of the Entity is not a natural person, please provide the name(s) and address(es) for the of the non-natural person member of that Entity, and provide the formation filing documents for such Entity.
5. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Entity:	
Address:	
Telephone Number:	
E-Mail Address:	
State/Date of Formation:	
Contact Person:	

PART TWO:

6. Please list all persons, officers, limited or general partners, directors, members, shareholders, managers, authorized persons, beneficial owners, and any others with any interest in or with the above referenced entity.
7. Please NOTE that an "authorized person" means an individual or entity, whether or not a shareholder, member, officer or director, or person identified by any other title, who is authorized to act, solely or in conjunction with others, on behalf of or for the Entity.
8. List all persons with a membership or voting interest or controlling position in the Entity. Please provide that parties' business or personal address and telephone number, email address and other contact information.
9. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

<u>Name of Individual</u>	<u>Address</u>	<u>Telephone</u>	<u>Email</u>	<u>Interest or Role in Entity</u>
1.				
2.				
3.				
4.				
5.				
6.				

PART THREE:

- 10. Is any person identified in Part TWO currently employed by or hold a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? *Please circle:* YES NO
- 11. Is any person identified in PART TWO the spouse, sibling, parent, child, or grandchild of any individual who is employed by or holds a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? *Please circle:* YES NO
- 12. Does any person identified in PART TWO perform services for or have a contract, or employed by an entity that has a contract to perform services for the Town of Orangetown? Please circle: YES NO
- 13. If the answer is "YES" to any of the above, please provide a supplement sheet and list every Board, Department, Office, agency or other position with the Town of Orangetown in which the party has a position, paid or unpaid, or provides services for, and identify the agency, title and date of hire.

PART FOUR:

- 14. The information contained herein shall be updated with the Clerk of the Boards no later than THIRTY (30) DAYS after any change in information.
- 15. **NOTE: Any person who (a) provides false or fraudulent beneficial ownership information; (b) willfully fails to provide complete or updated information; or (c) during the application process, fails to obtain or maintain credible, legible and updated beneficial ownership information shall be subject to suspension of any pending application by the applicant entity, or a "stop work" order on any work relating to the application, or both, in addition to any other applicable penalties under the Town Code, or State and Federal Statute, or both.**

STATE OF NEW YORK )  
 ) ss.:  
 COUNTY OF ROCKLAND )

I, \_\_\_\_\_, being duly sworn, deposes and says that I am (Title) \_\_\_\_\_, an active or qualified member of the \_\_\_\_\_, a business duly authorized by law to do business in the State of New York, and that the statements made in the foregoing Affidavit are true, accurate and complete. I further understand that Land Use Applications may have a significant impact upon the health, safety and general welfare of the Town of Orangetown and its inhabitants and visitors; and that the Town Board is required to be certain that anyone with an interest or controlling position of an Entity, who applies for any land use approval or permission must have no conflict of interest as that term is described in NYS Town Law, as well as NYS General Municipal Law, and that the disclosure of any officers, directors, members, shareholders, managers, authorized persons, beneficial owners, any other controlling parties with the above entity, and all persons with a membership or voting interest in the entity is required to be made in any land use application or request for any approval from the Town, to be certain no conflict of interest exists and without the disclosure, a full review of any conflict cannot take place.

\_\_\_\_\_  
 Signature

Sworn to and subscribed in my presence  
 This \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
 NOTARY PUBLIC